_ WELL ID_

KOLAR DOC ID

Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367 (785) 296-3565 | K.S.A. 82a-1212 | v2022c

WATER WELL RECORD (WWC-5)

From _____ ft. to _____ ft.

LOCATION OF WAT	ER WELL			Ori	iginal Recor	d Correction	Change	in Wel	ll Use
Latitude	Longitude		Section	Township	Range	E W Fraction	1/4	1/4	1/4
Datum	Elevation		County			,,,			
WATER WELL OWNE	R	WE	LL WATER US	E		NEAREST SOURCE OF P	OTENTIAL CO	NTAMIN	IATION
Name						Source:			
Business		СО	MPLETION			Distance	Direction		
			enth of comple	ted well:	ft	from well:	_ from well:		
Address			Depth of completed well:ft. Depth(s) groundwater encountered:			Source description:			
			(1) ft; (2) ft;			Source:			
Well location			(3) ft.; (4) dry well						
			Static water level in well: ft.			Distance from well:	_ from well:	:	
at owner's address			measured below land surface			Source description:			
address			on (mm/dd/yy):						
CONSTRUCTION				ove land surface		No potential source within 100 feet.	e of contamin	ation	
Borehole interval:	Borehole dia		on (mm/dd/y			PERMIT & ID NUMBER	S (AS REQUIF	RED)	
fromto	_		stimated yield:						
fromto ft in.			Water level was: ft. afterhours			DWR Application No.:			
Casing height above land surface:in.			pumpinggpm			KDHE / EPA Project C			
If casing height is less than 12 in. has a variance been approved?* Yes No			ımp installed?	Yes No		Site Name: KDHE UIC Class V Fo			No
has a variance been approved?* Yes No *variance not required for monitoring			Water well disinfected? Yes No				•		
or environmental remediation wells			Date disinfected (mm/dd/yy):			County Permit: Yes No Permit ID: Lease Name & Well #:			
Casing type:						# of boreholes:			
	l:ft. to		quifer, if know						
Blank casing diamet			HOLOGIC LOC						
	11 /6.	<u> </u> F	ROM TO	LITHOLOGY INTE	RVALS				
_	lbs/ft. r gauge no.:								
	l:ft. to								
Blank casing diamet									
Casing joints:									
Weight:									
Wall thickness o	r gauge no.:								
Grout interval:	ft. to ft.								
Grout interval:									
Grout material:_		СО	MMENTS						
Screen / perforation	material:								
_	openings:	co	NTRACTOR'S	OR LANDOWNERS CE	RTIFICATION				
Screen / perforation	intervals:	T	his water wel	was constructed	reconstru	cted pursuant to	the stated wa	iter well	
Fromft. to		co	ontractor's lic	ense and was comple	ted on	I certify tha	t this record	is true	to
	unit	th	ne best of my	knowledge and belief	f. This water v	well record was complet	ted on		
Fromft. to		u	under the business name of,						
	unit	K	ansas Water	Well Contractor's Lic	ense No	under the aut	hority of the	designa	ated
Gravel pack interval			person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the						
From ft.	used: Gravel size _		esignated per	son at its submittal:_					
Gravel pack not i						e for your records. Fee of \$5	5.00 for each c	onstructe	ed well
From ft		KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT							

Form	WWC5.2 - Water Well Record
Doc ID	1738819
Well Owner	Kisner #2
Contractor	Karst Water Well Drilling and Service, Inc.

Lithology

From	То	Lithology Intervals
0	2	topsoil
2	17	clay,Limestone Rock
17	140	shale,slightly weathered
140	160	clay,gray,sandrock streaks
160	209	clay,gray
209	215	other,sandrock
215	240	clay,reddish,gray
240	244	other,sandrock
244	255	clay,gray,sandrock streaks
255	300	other,sandrock